## PART B-FEE(S) TRANSMITTAL

Complete and mail this form, together with applicable fee(s)s, to: Mail Box ISSUE FEE

Commissioner for Patents Alexandria, VA 22313-1450





INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

FIRST NAMED INVENTOR

Omar M. Buazza

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

FILING DATE

02/09/2001

7590

10/27/2003

ERIC B. MEYERTONS

MEYERTONS, HOOD, KIVLIN, KOWERT & COETZEL, P.C

P O BOX 398

APPLICATION NO.

09/780,076

AUSTIN TX 78767-0398

FEB 0 2 2004 33

Note: The certificate of mailing below can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

B. Ga	il Balt	ard		2	1	1	(Depositor's name)
当.		lu.	D.C	DL	I	W	Signature)
		1.1	17	-04		•	(Date)
		ATTOI	NEY	DOCKET	NO	).	CONFIRMATION NO.

7773

5040-04203/EBM

TITLE OF INVENTION: PLASTIC LENS SYSTEMS

		ISSUE FEE										
APPLN. TYPE	LN. TYPE SMALL ENTITY		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE							
nonprovisional	nonprovisional Yes		\$300.00	\$965.00	01/27/2004							
EXAMINER	AR	T UNIT CLASS	SUBCLASS									
HECKENBERG JR, DONA	LDH.	1722 425	425-090000									
Change of correspondence address     Change of correspondence ad form PTO/SB/122) attached.      "Fee Address" indication (or	dress (or Change of Corr	respondence Address attc nan regin form PTO/SM/47) up	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents.  1 MEYERTONS, HOOD, KIVLIN, KOWERT & GOETZEL, P.C.									
attached. Use of a Customer Number is required.  If no name is listed, no name will be printed.												
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)												
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE:  (B) RESIDENCE (CITY & STATE OR COUNTRY):												
Q2100, Inc.			Louisville	Louisville, KY								
Please check the appropriate assignee category indicated below (will not be printed on the patent): 🗆 individual 🛮 corporation or other private group entity												
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s)::												
☑ Issue Fee	☑ Issue Fee ☑ A fee authorization in the amount of the fee(s) is enclosed.											
☐ Publication Fee		☐ Payment by cr	by credit card. Form PTO-2038 is attached.									
☑ Advance Order - # of Copies 5	☑ Advance Order - # of Copies 5 ☑ The Commissioner if hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1505/5040-04203/EBM* (enclose an extra copy of this form).											
The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.												
(Authorized Signature)		(Date)										
JA .		eyertons o. 34,876   . 27	·04 02/05/2004 W	ASFAW2 00000218 50150	5 09780076							
NOTE: The Sue Fee and Publication the applicant; a registered attorney or records of the United States Patent and	agent; or the assignee or o	vn by the 01 FC:2501	01 FC:2501 665.00 DA									
This collection of information is requiretain a benefit by the public white Confidentiality is governed by 35 U.S. minutes to complete, including gather to the USPTO. Time will vary depend time you require to complete this form the Chief Information Officer, U.S. I Washington, D.C. 20231. DO NOT SE TO: Commissioner for Patents, Washington, Washington, Commissioner for Patents, Commissioner for Pat	tired by 37 CFR 1.311. The ch is to file (and by the S.C. 122 and 37 CRR 1.14. 'ring, preparing, and subm ling upon the individual con and/or suggestions for repatent and Trademark Of ND FEES OR COMPLETEI	plication. o take 12 tion form mount to be sent to sommerce,	300.00 DA 15.00 DA									

information unless it displays a valid OMB control number.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

§

§

§

§

§

§

§

§

§

Application No.: 09/780,076 Confirmation No.: 7773 Filed: February 9, 2001 Inventor(s):

Buazza et al.

Title: PLASTIC LENS

SYSTEMS, COMPOSITIONS, AND

**METHODS** 

Examiner:

Heckenberg Jr, D.H.

Art Unit:

1722

Atty. Dkt. No: 5040-04203

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8

DATE OF DEPOSIT:

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail on the date indicated above and is addressed to:

Commissioner for Patents

PAYMENT OF ISSUE FEE

## MS ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313

Sir:

Please find enclosed:

- 1) Issue Fee Transmittal Form PTOL-85B (1 page);
- 2) A fee authorization in the amount of \$980.00 (2 pages); and
- 3) A return postcard evidencing receipt of these materials.

If any fees are inadvertently omitted or if any additional fees are required or have been overpaid, please appropriately charge or credit those fees to Meyertons, Hood, Kivlin, Kowert & Goetzel, P.C. Deposit Account Number 50-1505/5040-04203/EBM.

Buazza et al. 09/780,076

Respectfully submitted,

Eric B. Meyertons Reg. No. 34,876

Attorney for Applicant

MEYERTONS, HOOD, KIVLIN, KOWERT & GOETZEL, P.C. P.O. BOX 398 AUSTIN, TX 78767-0398 (512) 853-8800 (voice) (512) 853-8801 (facsimile)

Date: 1.27.04